SL0M22C90005 / Lai Huat (Meng Kee) Motor Pte Ltd ENTRY DATE & TIME: 09/12/2022 15:58 (SGT) SUBMITTED BY: LHMK -3 VERSION: 1 (09/12/2022 15:58 (SGT))

# **SINGAPORE ACCIDENT STATEMENT**

#### **IMPORTANT NOTICE**

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Form must be completed by the Policyholder and/or the Actual Driver
- 3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate policy liability.

  4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.

- 4. The issue and acceptance of this is form by instrained companies.
   5. Any false reporting may be referred to the Police for investigation.
   6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
- 7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

# **ACCIDENT STATEMENT**

Date of Submission 09/12/2022 15:58 (SGT) Reported by Date of Accident 19/11/2022 07:30 (SGT) Exact Location of Accident 527 Ang Mo Kio Ave 10, #10, Singapore 560527 Additional Location Information Country/State of Loss Singapore

# **DETAILS OF OWN VEHICLE**

Toyota

Vehicle Registration Number SMZ9184C

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner PEH AH YEW NRIC No S1636270J Email Address scienceexpert152@gmail.com Mobile Phone No (Phone) +65-97874371 Alternative Phone No

### VEHICLE PARTICULARS

Manufacturer

Model Corolla Variant Exact purpose for which vehicle was being used at time of accident Private use Are you claiming under your own insurance policy for repair to your vehicle? No - Reporting only Vehicle Category Private car Transmission Auto CC 1598

#### **INSURANCE COMPANY**

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd. Policy Number / Cover Note Number 7210052023

#### DRIVER

Name of Driver HO MEI YING NRIC No S7684727D Date Of Birth 01/12/1976 Occupation Indoor

Date Of Driving Pass 01/07/2004 Driving experience 18 YEARS AND 4 MONTHS Gender Female Mobile Number (Phone) +65-91154064 Alt. Phone Number Email Address scienceexpert152@gmail.com Address Blk 212B Punggol Walk #09-711 Address complement Postcode 822212 Is the driver the policyholder? No If No, Relationship of the Driver with the Insured Spouse Does Driver Own Other Vehicles? Nο Vehicle Registration Number of Other Vehicle Owned by Driver Insurance Company of Other Vehicle Owned by Driver GENERAL INFORMATION OF THE ACCIDENT Type of Accident Collision - Head on collision Weather Conditions Raining Road Surface Wet OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident Was anybody injured in the Accident? No Was any injured conveyed to hospital by ambulance? Was any other vehicle or property damaged? Yes Number of Passengers (Including Driver) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? No Translator's name Translator's ID Translator's phone number Translator's email Original language used in the statement DETAILS OF POLICE ACTION Was the accident reported to the police? Police Station Name Ang Mo Kio South Neighbourhood Police Centre Police Station Phone No (Phone) +65-18004519999 Alt. Police Station Phone No (Fax) +65-65535679 Police Station Address 81 Ang Mo Kio Ave 3 Singapore 569929 Was notice of intended Prosecution given? If yes, against whom? CIRCUMSTANCES OF ACCIDENT Please refer to the police report. ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? No **DETAILS OF OTHER VEHICLE PROPERTY 1** Vehicle Registration Number XD7726M

Vehicle Manufacturer
Vehicle Model
Vehicle Variant

Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

#### SKETCH PLAN

#### IMPORTANT NOTICE

- Please report correctly the details of the accident to speed up the claims process.
- 2. This Form must be completed by the Policyholder and/or the Actual Driver.
- Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.

# Any false reporting may be referred to the Traffic Police Department for investigation.

- This report will be forwarded by the insurers to the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
- By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

# 8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

(a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers", the Insurers' tawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:

(i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims:

- (ii) investigating the accident and/or my claims;
- (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
- (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
- (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.

(collectively the "Purposes")

(b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and

(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third-party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time

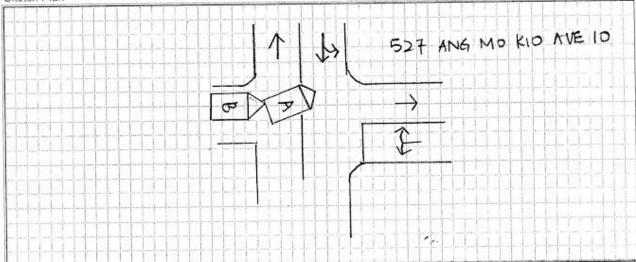
Policyholder's Signature / Date & Time

OG - 12-22

Driver's Signature (if driver is not the policyholder) / Date & Time 09,12-22

Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card) SOH JIT HOON

Sketch Plan



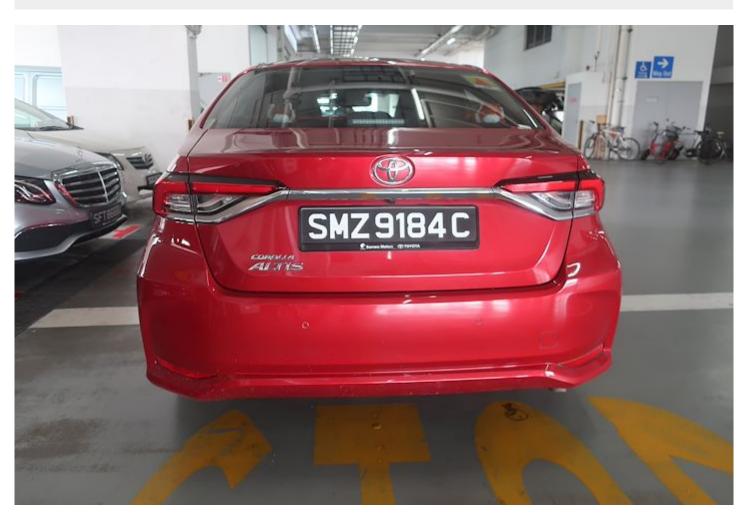
1

escribe Circums	stance of the Ac	cident					
	Please	refer	10	police	report	attached	
					1		
			-				

I/We declare the foregoing particulars are true in every respect.

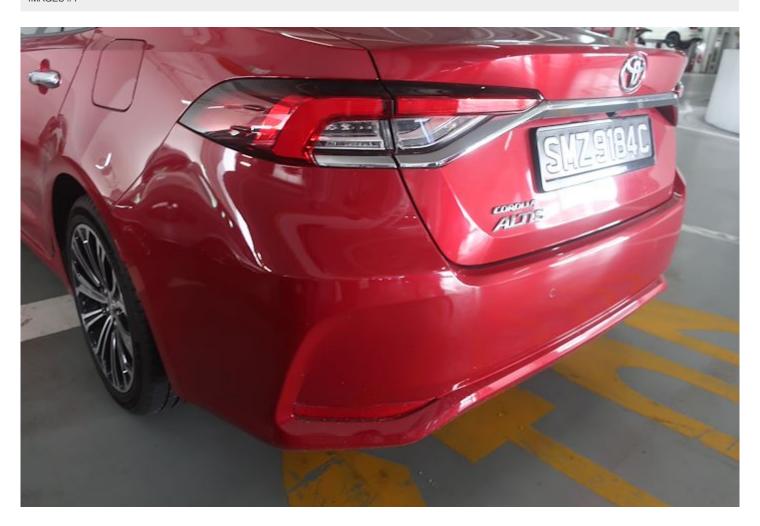
Driver's Signature (if driver is not the policyholder) / Date & Time 9-12-22

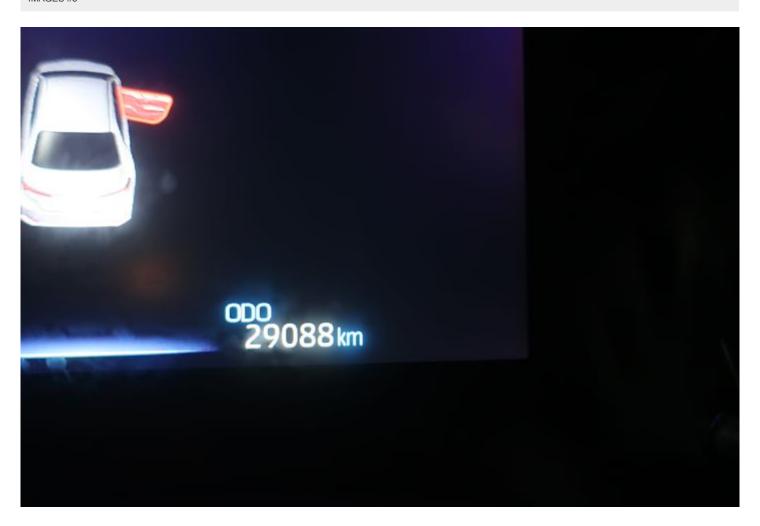
Witnessed by Reporting Centre Personnel (Name as in NRIC/ID card) SoH JIT

















Police Station Of Origin: Ang Mo Kio South N.P.C 81 Ang Mo Kio Avenue 3 SINGAPORE 569929

I of 3 Report No. T/20221207/2117

'Tel No: 1800-4519999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 07/12/2022 20;48		Made:	Vide Report No.:	Station Diary No.: 110		
Informac	it's Partic	ulars		HALL THE RESERVE T		
Name of Informant: HO MEI YING Address: APT BLK 212B PUNGGOL 822212			VALK #09-711 SINGAPORE			
ID Type / ID No.; NRIC NO / S7684727D			Contact No.: Home/Office:	Mobile: 91154064		
Nationality: SINGAPORE CITIZEN		EN	Email:			
Sex: Age: Date of Birth: Female 46 01/12/1976			Type of Informant:			
Race: Chinese			Language:	Institution / School Name:		
Occupation: HAWKER ASSISTANT		NT	Driving Licence Information: Class: 2B,3	Date of Expiry:		

General Infor	mation of the Accid	ent	and the second second second second	THE PARTY OF STREET	
Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 19/11/2022 07:30	Type of Location: Car Park	
·Location:  ANG MO KIO  Weather: Raining	AVENUE 10	Road Surface:		Road Speed Limit:	
Traffic Flow:		Traffic Control:		Traffic Volume:	
Type of Collis Between Mov	ion: ing Vehicles - Head (	On .		Anyone conveyed by ambulance:	

Details of V	chicle involved	USCHER COLUMN	SEASON IN	THE EVERY	DELT-MERSEN	
Vehicle No.	Type	Maker	Model	Color	Condition	No of Passenge
SMZ9184C	Car				Slightly Damaged	0



T/20221207/2117

Police Station Of Origin: Ang Mo Kio South N.P.C 81 Ang Mo Kio Avenue 3 SINGAPORE 569929 2 of 3 Report No. T/20221207/2117

Tel No: 1800-4519999

CONTINUATION OF REPORT

#### Brief Details.

On 19/11/22 at around 0730hrs, I was at the carpark near the rubbish collection of Blk 527 Ang Mo Kio wanting to come out from the carpark. At that point, both lanes were very crowded with other vehicles as it was raining. As I needed to reverse to exit the carpark, While reversing i suddenly heard a bang and saw that the Lorry (XXD7726M) and my vehicle knocked into each other. I am unsure of who hit the vehicles first. However the lorry driver continued proceeding to the collection point without stopping his vehicle. I then got off my vehicle and checked and noticed slight scratches and dent to my vehicle. The driver of the lorry then approached me and both of us made a check on the vehicles and the lorry driver informed that there was no damages to his vehicles. I then recieved a Police letter to lodge a traffic accident report regarding this accident.





3 of 3 Report No. T/20221207/2117

1004-1007-11-007-2

Police Station Of Origin: Ang Mo Kio South N.P.C 81 Ang Mo Kio Avenue 3 SINGAPORE 569929

Tel No: 1800-4519999

or grant man

## Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

CONTINUATION OF REPORT

Signature of Officer Recording The Report:	Signature Of Informant:		
SGT 1 Lai Shihao	(Ho		
Signature Of Interpreter: Not applicable	Date/Time: 07/12/2022 20:48		
pr.			
Officer In Charge Of Case: TP / GIA / SR STAFF SGT MUHAMMAD NOOR BIN	Classification Of Case:		
ABDUL RAHMAN	-		
Contact No.: 65476219			
NP168			



# **COVER NOTE**

# TOYOTA AUTO PROTECTOR PRIVATE VEHICLE

The following risk described on this Cover Note is hereby HELD COVERED on the terms and conditions of the policy issued to the Policyholder.

SMZ 9184C Name of Policyholder : PEH AH YEW Vehicle No. Period of Insurance

: 21 May 2021 to 20 May 2023 : 7210052023 Cover Note No. Engine No. : 1ZR0G87739 Endorsement No.

Chasis No. : MR2BE3BE200014690 Issued Date : 21 May 2021

# ABOUT THE COVER

Make/Model : TOYOTA COROLLA ALTIS 1.6

Engine Capacity/Tonnage : 1,598.00 CC Sum Insured : Market Value First Year of Registration : 2021 Driver Restriction : NA Off Peak Car : No Insuring with COE/PARF : Yes

Person or Classes of Persons Entitled to Drive\* :

a) The Policyholder
 b) Any other person who is driving on the Policyholder's order or with his/her permission.
 This Policy will indemnify the Policyholder or any authorised driver only if he/she meets the specified age condition.

You have to pay tan additional sum of \$3,000 as "Young and/or Inexperienced Driver Excess" ("YIDR") if You are or Your Authorised Driver (named or unnamed) is under the age of 23 and/or has less than 2 years' driving experience

Age Condition : All Age Condition Mileage Condition : Unlimited Mileage

Limitation as to use\*

Use only for social, domestic and pleasure purposes and for the Policyholder's business.
This Pokey does not cover use for him or reward, driving tuition, driving test, racing, pace-making, reliability trial or speed-testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with Motor Trade.

Loss of Use 1500cc - 1600cc

\*\*Limitations rendered inoperative By Section 8 of the Motor Vehicles (Third-Party Risks and Companion) Aut (Cap. 188) and Section 96 of the Road Transport Act, 1967 (Melaysia), are not to be included under these headings.

#### **EXCESS**

Section 1

Fire - \$0 Own Damage - \$600 Theft - \$0 Flood Cover - \$600

Section 2

Property Damage - S0

Windscreen: \$100

Named Driver and Excess (where applicable) PEH AH YEW - \$600 (Own Damage), \$500 (Flood Cover)

# APPROVED REPORTING CENTRES/AUTHORISED REPAIRERS (FOR CLAIMS RELATED REPAIRS)

Toyota Bodycare Centre (For accident repair & accident reporting). Add; 2 Pandan Crescent Singapore 128462 Tel: 8631 118.

2.Toyota Bodycare Centre (For accident repair & accident reporting). Add: 17 Ubi Road 4 Singapore 408611 Tel: 6631 1688.

For other Approved Reporting Centres/AIG Authorised Recatrers, please contact our 24-hour secident emergency hotine at 465 6338 6200. Alternatively, you may refer to AIG website www.eig.ag or AIG SG Mobile App. Simply search and download "AIG SG" from iTunes or Google Play.

# IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: Toyota Financial Services Singapore Pte Ltd

If you do not receive your Certificate of insurance and policy documents within 30 days from the inception date stated on this cover note, please contact AIG immediately.

We hereby certify that this Cover Note is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 189), Part IV of the Road Transport Act, 1987

(Malaysia) and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia). For Corporate Policies, this Cover Note is valid for 60 days from the commencement date of the period of insurance.

0504867245

INCHCAPE AUTO TOYOTA - BSTU008

AIG Asia Pacific Insurance Pte. Ltd. This computer generated document does not require a signature.

33 LENG KEE ROAD

SINGAPORE 159102

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

Pei Li Christina Ho

79 Sherion Way #00-16 AIG Building \$079120 | T +65 6419 \$000 | www.ag.eg

AIG Asia Pacific Insurance Pte. Ltd.